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Item 8 (a) of the provisional agenda*

Country programme document

Dominican Republic

Summary

The country programme document (CPD) for the Dominican Republic is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of $4,625,000 from regular resources, subject to the availability of funds, and $10,850,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2018 to 2022.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2017.

* E/ICEF/2017/14

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Programme rationale[1]

1. The Dominican Republic is a democratic upper-middle-income country. An island nation in the Caribbean Sea, it is vulnerable to natural disasters, hurricanes, drought, earthquake and shocks due to climate change. The population is 10 million, of whom 35 per cent are below the age of 18 years, with 79 per cent living in urban areas and 21 per cent in rural areas.

2. The country has experienced economic growth above the regional average over the last 15 years (average growth of 5 to 7 per cent since 2001) but significant inequality and exclusion gaps persist. Over the same period, 7 per cent of the population shifted from being classified as vulnerable to the middle class, compared to a shift of 41 per cent for the region. From 2005 to 2015, monetary poverty fell from 48 to 32.3 per cent, which represents a return to the level of 2003, when the financial crisis pushed 1 million people into poverty. According to the United Nations Economic Commission for Latin America and the Caribbean (ECLAC), in 2011 47.8 per cent of children and adolescents were multidimensionally poor and 52.6 per cent lived in poor households. The most vulnerable regions of the country are found primarily in the peri-urban areas of Santo Domingo and Santiago and in the provinces bordering Haiti.

3. The country's economic growth is not reflected in its social expenditure, which in 2013 were only 9 per cent of gross domestic product (GDP) and are below the regional average of 19 per cent (2013-2014). Investment in childhood as a percentage of GDP rose by 59 per cent between 2009 and 2013 but remains below the regional average (3.6 per cent compared to 5.1 per cent); 86 per cent of this investment is allocated to education.

4. The Dominican Republic has made significant achievements in fulfilling the rights of children. From 2010 to 2014, registration of births of children under age 5 years rose from 82.2 to 88 per cent. Medical insurance coverage increased from 9 to 64 per cent from 2007 to 2016, and measles, polio, congenital rubella syndrome and iodine deficiency were eliminated. The prevalence of malnutrition in children under age 5 years fell from 11 to 7 per cent from 2002 to 2013. From 2010 to 2016, public spending on education increased from 1.5 to 3.8 per cent of GDP, enabling the Government to expand coverage of the extended school day and increase the number of schools. The Progress with Solidarity (*Progresando con Solidaridad* (PROSOLI)) conditional cash transfer programme expanded to cover 1.1 million children aged 0-17 years. In 2017, a plan to reduce extreme poverty was launched, including a component focusing on childhood and adolescence. An index of vulnerability to climate shocks was created, which will be useful in the prevention and mitigation of and response to disasters. The year 2017 also saw the implementation of the National Road Map for the Prevention and Elimination of Violence against Children and Adolescents.

5. Nonetheless, there are still significant obstacles to achieving the Sustainable Development Goals, particularly those related to early childhood and the poorest

[1] The data cited in this section come from official sources, particularly the National Office of Statistics (2014 Multiple Indicator Cluster Survey (MICS), known as the *Encuesta Nacional de Hogares de Propósitos Múltiples* (ENHOGAR); 2013 Demographic and Health Survey; population estimates); the Ministry of the Economy, Planning and Development; Ministry of Health and the PROSOLI cash transfer programme. Two studies on child protection conducted by non-governmental organizations were also used. Regional data are sourced from the United Nations Economic Commission for Latin America and the Caribbean or the World Bank.

adolescents. Challenges in early childhood start during pregnancy: although prenatal care coverage is 98 per cent and the institutional birth rate is 97 per cent, the maternal mortality ratio is 101.8 per 100,000 live births,[7] which is higher than the Latin American average of 68. The neonatal mortality rate is 25 per 1,000 live births, almost triple the regional rate of 9. This rate has not changed during the last two decades, accounting for 80 per cent of infant mortality, and does not vary by socioeconomic level. The shortage of general and obstetric nursing staff creates a bottleneck that contributes to this situation. The rate of mother-to-child transmission of HIV is 5.4 per cent. Although the birth registry has offices in hospitals and registration is free, 12 per cent of children below the age of 5 years are not registered, rising to 28 per cent in the poorest quintile and to 43 per cent for children of mothers with no formal education. This is explained partly by the poor quality of service provision and the lack of coordination with health care staff.

6. Until 2014, when the National Plan for Early Childhood was introduced, only 40 per cent of children aged 3-4 years attended a preschool programme, falling to 16 per cent for the poorest. The plan provided integrated early childhood care and education services for an additional 100,000 children aged 0-5 years.

7. Although the net primary school attendance rate is 95 per cent, 4.4 per cent of children and adolescents are outside the system, and this rate is almost double for the poorest quintile (8.3 per cent). The net secondary school attendance rate is 61 per cent, but 14 per cent of adolescents do not attend school, rising to 27 per cent in the poorest quintile; 25 per cent are held back in basic education, which increases their risk of dropping out. Almost half of children and adolescents with disabilities do not attend school, and schools lack sufficient technical support to include them.

8. Quality is the main challenge in education. Children's learning outcomes are low primarily due to the low level of teacher training. Of the 36,884 professionals who graduated in 2014, only 31 per cent passed the Ministry of Education's competitive examinations. This is compounded by the limited coverage of early education (47 per cent). Child labour, adolescent pregnancies, child marriage and violence are external factors that affect learning and contribute to children's abandoning school.

9. The Dominican Republic faces major challenges in protecting children against violence, abuse and exploitation. Sixty-three per cent of children and adolescents aged 1-14 years are victims of violent discipline at home, and 13 per cent of those aged 5-17 years work, rising to 20 per cent in the poorest homes. The Committee on the Rights of the Child has expressed concern at the conditions of 3,589 children and adolescents in children's homes and 450 adolescents who have been deprived of liberty.

10. Five per cent of adolescents aged 15-19 years report having been a victim of sexual violence, and 29 per cent of victims of reported sexual crimes are minors. According to a study conducted in border communities, 36 per cent of adolescents reported having had sexual relations with adults in exchange for money or gifts.

11. Migration and the transit of people between Haiti and the Dominican Republic represent significant risks for children and adolescents, particularly those who are unaccompanied. The country has 524,632 immigrants, of whom 458,233 are from Haiti (78,880 under 20 years of age). Until 2015, the majority were not legal residents. The Plan for the Regularization of Foreigners was implemented in 2015, and 249,947 applications

[7] Ministry of Health, 2013.

were received, including for 10,315 children. In 2013 the Constitutional Court issued ruling 168-13, which considered the children of foreign parents without legal residence born in the country since 1929 to be foreigners. Act 169-14 limited the effects of this ruling, establishing that existing entries in the register of births would be respected, and creating a special procedure to regularize the legal position of those who are not registered. At least 55,000 birth registrations were ratified, and 8,700 people not previously registered applied to be recognized as residents. Anyone who has not applied under these procedures and does not have legal residency may be deported. UNICEF continues to support the Government's decision to avoid deporting children, adolescents, pregnant women and families with children.

12. Accumulated factors of inequity have a significant impact on the lives of adolescent girls, increasing their vulnerability: 37 per cent of young women were married before age 18 years, and 12 per cent before the age of 15 years. These rates rise in the poorest quintile to 59 and 23 per cent respectively. The country has one of the highest rates of adolescent pregnancy in the region, with 90 births for every 1,000 women aged 15-19 years; 21 per cent of young Dominican women became mothers before the age of 18 years, rising to 40 per cent in the poorest quintile and 55 per cent among young women with no formal education. Gender inequality and the impact of cultural patterns compound this situation.

13. Despite significant efforts by the Government, important barriers remain: limited investment in childhood and adolescence; poor access to and quality of social services; inadequate intersectoral coordination; poor quality of information systems; and weak mechanisms for monitoring and evaluation of public policy for children and adolescents. These issues are compounded by discriminatory cultural patterns and social practices that reproduce gender inequality, sexism and the social tolerance of practices that violate the rights of children and adolescents.

14. Joint work between the Government and UNICEF has generated good practices to overcome some of these barriers. In selected hospitals, low quality of care was identified as the principal cause of maternal and neonatal deaths, and an initiative was successfully implemented for the continuous improvement of the quality of care, based on the identification of bottlenecks in each hospital and monitoring of adherence to maternal and neonatal care standards and protocols.

15. Evaluation of a joint birth registration initiative of the Central Electoral Board and UNICEF showed the importance of implementing continuous monitoring of civil registry offices in hospitals, training health staff and informing mothers. As a result of this intervention, the percentage of births registered in selected hospitals rose from 41 to 67 per cent from 2012 to 2015.

Programme priorities and partnerships

16. Within the United Nations Development Assistance Framework (UNDAF) 2018–2022, the UNICEF country programme will support the Dominican Republic to ensure that the most vulnerable children and adolescents effectively exercise their rights. The programme will contribute to achievement of the Sustainable Development Goals, meeting the targets of the National Development Strategy 2030, implementing the Multi-year Plan for the Public Sector and supporting national responses to the recommendations arising from relevant treaty bodies.

17. The programme is based on the principles of justice, social inclusion, gender equality and protection against violence, and will focus on provinces bordering Haiti, rural communities and peri-urban areas of Santo Domingo and Santiago. Priority will be given to communities included in government programmes to combat extreme poverty and expand social protection. The programme will focus on young children and adolescent girls, due to the human rights violations experienced by these groups. The programme will involve innovative initiatives which, following evaluation, may be scaled up.

18. The programme is aligned to the UNICEF Gender Action Plan, including a new intersectoral model to prevent child marriage, adolescent pregnancy and HIV, to be implemented in coordination with government programmes for social protection and to reduce extreme poverty. A gender focus will be mainstreamed in health, early childhood and in the elimination of violence in order to promote cultural patterns that recognize the rights of girls.

19. Joint work with the United Nations system, other international cooperation bodies and civil society organizations will be strengthened, as will South–South and triangular cooperation. Alliances will be established with the private sector to promote corporate social responsibility in favour of the rights of children and adolescents, and to ensure support for advocacy to achieve programme results and to mobilize national investment in children. The commitment of ordinary citizens and the participation of children and adolescents will be promoted.

Social inclusion

20. The programme will help the most vulnerable children and adolescents, particularly girls, to benefit from policies and access high-quality public programmes that promote social inclusion and are supported by Dominican society. The component will support the country in implementing strategic area 2 of the National Development Strategy to achieve a society with equal rights and opportunities. It will contribute to the inclusion of relevant goals and indicators for childhood in national monitoring of the Sustainable Development Goals and promote the achievement of Goals 1, 5 and 10. It will support implementation of General Comment No. 19 of the Committee on the Rights of the Child on public budgeting for the realization of children's rights

21. The key bottlenecks to social inclusion are: (a) lack of a conducive environment, as reflected in the relative weakness of the national statistics system, the limited availability of data on multidimensional child poverty and studies of the situation of children and adolescents, low investment in childhood and lack of regular measurement; (b) limited coverage of social programmes and poverty reduction programmes, including issues that are not addressed such as child marriage; and (c) cultural patterns that promote the reproduction of systems of exclusion and injustice that justify and promote child marriage

22. Working in partnership with national institutions, the following strategies will be implemented:

(a) Strengthening national capacities to produce disaggregated, regular, timely, high-quality data on childhood, including data on the vulnerability of children and adolescents to the effects of climate change. The knowledge generated will support public policy development, decision-making and improved awareness on the part of civil society;

(b) Strengthening national capacities to measure and analyse investment in childhood. Advocacy will focus on increasing such investments , particularly in sectors

with lower levels of investment and in the poorest regions, and to ensure that investments in children will be protected from financial and economic volatility and from the need to respond to humanitarian emergencies;

(c) Strengthening government capacities to implement the social protection programme and the extreme poverty reduction strategy so that: (i) multidimensional child poverty is measured regularly; (ii) coverage of the PROSOLI conditional cash transfer programme is increased, in particular for children with disabilities and families whose head of household has no identify document; (iii) coordination and implementation of social programmes is promoted as part of the humanitarian response to emergencies; and (iv) a new intersectoral model for the prevention of child marriage and adolescent pregnancy is designed and implemented, in coordination with all programme components;

(d) Support for mass media campaigns to sensitize citizens regarding the rights of vulnerable children, particularly adolescent girls. The participation of children and adolescents in peri-urban areas will be promoted;

(e) Private sector participation will be fostered to include children's rights within corporate social responsibility programmes, to ensure support for advocacy and to achieve programme results, and to mobilize resources for UNICEF.

23. In order for this programme to be successful:, (a) the Government must maintain its interest in measuring progress towards the Sustainable Development Goals, investing in childhood and expanding the social protection programme; (b) the Government must successfully implement the extreme poverty reduction strategy; and (c) society and the private sector continue to collaborate with UNICEF.

24. The principal partners of the component are the National Statistics Office, Office for Social Policy Coordination, Ministry of Economy, Planning and Development, Ministry of Treasury, Directorate General of Special Programmes of the Presidency, civil society organizations, the private sector, the media and opinion leaders.

Area of protection

25. This component will help to ensure that vulnerable children and adolescents exercise their rights to their identity, to live in families and to be protected from violence, sexual abuse and exploitation. Efforts will be focused on adolescent girls from the poorest families, and on children and adolescents in transit between Haiti and the Dominican Republic. The programme will respond to the observations and recommendations of the Committee on the Rights of the Child and will support the country in achieving thematic areas 1 and 7 of the National Development Strategy and Sustainable Development Goals 5, 10 and 16.

26. The main issues to be addressed are: the lack of a favourable environment to overcome legal gaps in the birth registration system and establish a minimum age for marriage; lack of coverage of foster family programmes and programmes to prevent violence and protect the victims of sexual exploitation and abuse; poor quality of services due to limited training of officers; insufficient demand for services by families; and cultural patterns that favour violence and social acceptance of violence.

27. Working in partnership with national institutions, the following strategies will be implemented:

(a) National and local capacities of child protection systems will be strengthened in order to: (i) increase the coverage and quality of services to protect children and adolescents, particularly adolescent girls who are victims of violence, abuse and sexual exploitation; (ii) support the prosecution of these crimes; and (iii) reduce the incidence of institutionalization of children and adolescents. UNICEF will advocate promotion of the reforms and legislative initiatives required to ensure an effective protection system, and support awareness-raising campaigns to generate changes to the cultural practices that promote violence;

(b) Advocacy and awareness-raising will be directed to the communities and the tourism-related private sector, and to promote intersectoral work with the institutions involved in the National Road Map for the Prevention and Elimination of Violence against Children and Adolescents;

(c) Technical assistance will be provided to the Central Electoral Board to reduce under-recording of births of children through the nationwide initiative to promote registration in hospitals immediately after birth. Late registration (more than 60 days after birth) will be supported in the poorest and border communities, with efforts focused on the children of adolescent mothers;

(d) To protect children and adolescents in transit between the Dominican Republic and Haiti, technical assistance will be provided to the institutions responsible for migration and border security and to border communities for the establishment of local child protection mechanisms. Alliances will be strengthened and bilateral collaboration between the two countries will be promoted. UNICEF will continue to support the Government's decision not to deport children and adolescents.

28. Assistance will be provided to protect children in emergency situations, whether during the preparation, response or recovery phase.

29. The factors critical to the success of the programme are that the Government continues to prioritize the implementation of the National Road Map for the Prevention and Elimination of Violence against Children and Adolescents, universal registration and protection of children in migratory transit.

30. The principle programme partners will be the Public Prosecutor's Office, Central Electoral Board and the National Council for Children and Adolescents.

Children survive and thrive

31. This component will contribute to national efforts to ensure that pregnant women, newborns and adolescent girls have access to high-quality services to reduce maternal and neonatal mortality, the transmission of HIV and adolescent pregnancy.

32. The programme will respond to the observations and recommendations of the Committee on the Rights of the Child to guarantee the population's right of access to an integrated health model and the achievement of Sustainable Development Goals 3 and 5.

33. This component will address the lack of a conducive environment as reflected in a limited public budget; weaknesses in the management of health services and poor quality of care due to failure of staff to adhere to protocols and quality standards and to obstetric violence; limited availability of supplies and equipment, especially for counselling adolescent girls; limited availability of information for women about their health and the health of newborns; and unenforceability of rights.

34. In partnership with health institutions, UNICEF will support the following strategies:

(a) Technical assistance to implement the model of continuous improvement of the quality of maternal and neonatal health care. UNICEF was asked by the Government to support this model in 12 public hospitals to generate conclusive evidence of its validity. The approach strengthens the technical capacities of hospital managers and health staff to implement improvement plans for each hospital, which are based on established care standards and protocols. Intensive monitoring and motivation of staff are key to its success;

(b) UNICEF will support the capacities of national and regional health services to extend the approach throughout the public health network. UNICEF will provide support to the Ministry of Public Health for monitoring and evaluation of the hospitals in order to certify those that have achieved the targets;

(c) Advocacy will be directed at increasing the health budget, with specific safeguards for funds for maternal and neonatal health, and at including quality indicators in service management contracts of health insurers and hospital management, increasing the number of nursing staff and promoting training in obstetric nursing;

(d) Capacity-building and empowerment of civil society to enforce the rights of women to humane, non-violent care before, during and after childbirth, and to increase families' knowledge of care for pregnant women and newborns.

35. Health interventions will contribute to the implementation of the intersectoral model for the prevention of child marriage and adolescent pregnancy. There will be ongoing care and support for children with congenital Zika syndrome.

36. The critical factors in the success of the programme are the Government's continued political will to reduce maternal and neonatal mortality and to implement the policy on public health quality management.

37. The capacities of institutions to prevent and respond to epidemics will be strengthened, including support for existing coordination mechanisms for water, sanitation and hygiene, and for nutrition.

38. The principal partners of the programme are the Ministry of Public Health, the National Health Service and civil society.

Learning for all

39. This component will support national efforts to ensure that children and adolescents have access to early childhood care and education services that are of high quality, relevant, inclusive and integrated.

40. The programme will respond to the observations and recommendations of the Committee on the Rights of the Child and will support the country in achieving thematic area 2 of the National Development Strategy and Sustainable Development Goals 4 and 5.

41. The key issues to be addressed are: (a) the lack of a favourable enabling environment due to insufficient inter-institutional coordination on early childhood and insufficient supervision and monitoring of service providers; (b) poor coverage of integrated care services in early childhood and of inclusive educational centres for children and adolescents with disabilities; (c) poor quality of education due to insufficient opportunities for education and training of teachers, limited pedagogical tools for inclusion of children and adolescents with disabilities and limited capacity to manage conflicts and violence at

school; (d) limited demand from families for integrated services for early childhood; and (e) school dropout among the poorest adolescents, especially girls.

42. Working in partnership with national institutions, the UNICEF will implement the following strategies:

(a) UNICEF will support improved access to, relevance and quality of integrated services for early childhood, particularly for children with disabilities, through: advocacy for expansion of coverage based on the effectiveness of investments in early childhood; strengthening the capacity of staff to promote changes in child-rearing patterns that affect the development of young children, including gender stereotypes and violent discipline; promoting increased demand for access to service by families through awareness raising activities; and fostering local inter-institutional coordination;

(b) Strengthening the capacities of the Ministry of Education and of schools in selected areas to improve the inclusion of children and adolescents with disabilities, and to ensure continued attendance and learning, by: (i) improving the capacities of teachers, focusing on early childhood education and the early years of primary school, with technical assistance to implement a new model for teaching of literacy and mathematics; (ii) improved teaching support in the classroom; (iii) technical assistance to improve monitoring of early warnings of the risk of academic failure; and (iv) technical assistance to resolve conflicts in schools through implementation of existing regulations for harmonious coexistence in education centres, to improve and implement pedagogic guidelines for the educational inclusion of children and adolescents with disabilities, and to improve retention or reincorporation in secondary education, primarily of the poorest adolescent girls, within the framework of the new intersectoral model to prevent early relationships, adolescent pregnancy and HIV described above.

43. In support of the Ministry of Education's emergency risk management programme, UNICEF will advocate the provision of educational services to children and adolescents and strengthen prevention, response and recovery mechanisms for the entire school community.

44. The factors critical to the success of the programme are the continued prioritization of the improved quality of education and of early childhood, and the maintenance or increase of investments in education.

45. The principal programme partners will be the Ministry of Education, which includes the National Institute for Early Childhood, and the Dominican Initiative for a Quality Education for identifying public policy and monitoring priorities.

Programme effectiveness

46. This component will support all activities related to programme implementation and management, including technical and strategic assistance. It covers the cost of programme coordination and cross-cutting issues such as performance monitoring and implementing a gender focus across sectors.

Summary budget table

Programme component	*(In thousands of United States dollars)*		
	Regular resources	*Other resources*	*Total*
Social inclusion	1 625	2 550	4 175
Child protection	1 000	3 700	4 700
Children survive and thrive	1 000	2 000	3 000
Learning for all	800	2 450	3 250
Programme effectiveness	200	150	350
Total	**4 625**	**10 850**	**15 475**

Programme and risk management

47. This country programme document summarizes the UNICEF contribution to the achievement of national results and is the principle mechanism for accountability to the Executive Board with respect to the alignment of results and resources allocated to the programme at the national level. The responsibilities of administrators nationally and regionally and at headquarters with respect to country programmes, are defined in the policies and procedures regarding the organization's programmes and operations.

48. UNICEF will participate in the Technical Committee for UNDAF Monitoring consisting of the Ministry of Economy, Planning and Development and the inter-agency group of the United Nations system, chaired jointly by the Government and the Resident Coordinator. UNICEF will participate in inter-agency working groups that plan and monitor UNDAF activities. UNICEF will assume the leadership of some of these groups.

49. Regular oversight of UNICEF programmes will be conducted with the ministries with primary responsibility for implementing programmes, in coordination with the Directorate General for Multilateral Cooperation of the Ministry of Economy, Planning and Development.

50. UNICEF will ensure full compliance with the harmonized approach to cash transfers and will participate, along with other United Nations agencies, in the implementation of measures to guarantee the efficient and transparent use of financial and material resources. Efforts to strengthen the capacities of local stakeholders and to promote alliances with civil society organizations will continue. UNICEF will drive joint United Nations system programmes and will support the implementation of the "Delivering as one" standard operating procedures.

51. Potential programme risks include lower levels of funding during certain periods and the inadequate involvement of key stakeholders. To mitigate these risks, the participation of duty bearers, the maintenance of cooperation with all levels of Government and strengthened promotion and protection of investments targeted at childhood will be guaranteed. Strategies to raise funds from multi-donor trust funds, local representatives of donor countries and the private sector will be implemented. This includes maintaining an updated risk prevention and reduction plan in programme components, in coordination with other United Nations agencies.

Monitoring and evaluation

52. The integrated monitoring and evaluation plan will be implemented at the three levels of the UNICEF country programme, the UNDAF and national efforts to achieve the Sustainable Development Goals. At the programme performance level, there will be monthly monitoring of management indicators, joint monitoring visits with state authorities to confirm progress towards outcomes, and biannual reviews with partners to monitor progress and bottlenecks. This plan will allow the necessary programme adjustments to be made, and will ultimately complement UNDAF review processes.

53. As a member of the UNDAF monitoring and evaluation group, UNICEF will monitor progress toward the achievement of joint outcomes, facilitate analysis and make recommendations through programme working groups, including recommendations for emergency prevention and response.

54. UNICEF, together with its United Nations partners, will support the interministerial commission for monitoring the Sustainable Development Goals and the Ministry of Economy, Planning and Development in their efforts to mainstream the Goals in the National Development Strategy, and in the preparation of annual progress reports on the strategy and childhood-related Goals. The national statistics system will be supported to enable monitoring of the situation of children, particularly of children and adolescents in situations of the greatest vulnerability.

55. UNICEF will conduct three evaluations to increase programme effectiveness and sustainability, focusing on comprehensive care in early childhood, the model for teaching literacy and numeracy, and the new intersectoral model for preventing early relationships, adolescent pregnancy and HIV, as outlined in the costed evaluation plan.

Annex

Results and resources framework

Dominican Republic – UNICEF country programme of cooperation, 2018-2022

Relevant Convention on the Rights of the Child articles: 2 to 7, 12, 13, 18, 23, 24, 27 to 31, 34-37, 39, 40.
Sustainable Development Goals : 1 to 5, 10, 16, 17

Related draft UNICEF Strategic Plan, 2018-2021 Goal Areas:[1] 1, 2, 3, 5.

National Development Strategy: Areas 1, 2, 3.

UNDAF outcomes involving UNICEF:

Area 2: Outcomes 3, 4, 5, 6.

Area 3: Outcomes 7, 8.

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome, regular resources (RR), other resources (OR) (in thousands of United States dollars)*		
					RR	*OR*	*Total*
1. By 2022 the most vulnerable children and adolescents, and especially girls, will have access to public policies and programmes that promote social inclusion and are supported by Dominican society	Percentage of children aged 0 to 17 years who live in multidimensional poverty B: 47.8% T: 43%	'Social Panorama of Latin America 2013' (ECLAC) National report on multidimensional child poverty	1.1. By 2022, the national statistical system will have strengthened its capacity to generate data and analytical evidence regarding the situation of children and adolescents 1.2. By 2022, public policies, social protection programmes, and the extreme poverty reduction strategy will have the capacity to monitor investment in children, and respond adequately to the needs of the most vulnerable children, especially adolescent girls	Vice-Presidency, PROSOLI, Directorate General of Special Programmes of the Presidency, National Statistics Office, Ministry of Economy, Planning and Development, universities, private sector, media	1 625	2 550	4 175
	Percentage of public budget allocated to children and adolescents as a percentage of GDP B: 3.6% T: 3.9%	National report on budget implementation					
	Percentage of those below the age of 18 years who live in households that received	Report of Office for Social Policy Coordination					

[1] The final version will be presented to the UNICEF Executive Board for approval at its second regular session of 2017.

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	some kind of social transfer during the last three months B: 31.4% T: 34%	Report on extreme poverty reduction	1.3: By 2022, Dominican society will be aware of and mobilized in favour of children's rights, especially of girls				
	Proportion of women aged 20- 24 years who are married or in a relationship before the age of 18 years B: 35.9% T: 30% Before age of 15 years B: 12.3% T: 10.3%	ENHOGAR/MICS					
2. By 2022, the most vulnerable children and adolescents will be able to exercise their rights to an identity, to live in a family and to be protected against violence	Percentage of children aged 1- 14 years who have been subject to psychological or physical abuse during the past month B: 62.9% (2014) T: 50% (2022)	ENHOGAR/MICS	**2.1:** By 2022, protection systems, including the legal system, will have the capacity to improve the coverage and quality of services, increase the protection of children against violence, abuse and sexual exploitation **2.2:** By 2022, the country will have the capacity to reduce under-recording of births in under-fives, supporting the nationwide implementation of the initiative for timely registration in hospitals **2.3:** By 2022, Dominican institutions will have the capacity to protect children and adolescents in a situation of transit and migration between Haiti and the Dominican Republic	Public Prosecutor's Office, legal authorities, National Council for Children and Adolescents, National Association of Hotels and Restaurants, Central Electoral Board, Vice-Presidency, Ministry of the Presidency, Directorate General for Migration, NGOs	1 000	3 700	4 700
	Percentage of children in the care of foster families (as a proportion of total number of children in formal alternative care) B: 0% (2015) T: 20% (2022)	National Council for Children and Adolescents administrative registers					
	Percentage of children aged below 5 years whose births are registered B: 88% (2014) T: 95% (2022)	ENHOGAR/MICS					
3. By 2022, pregnant women, newborns and adolescents will access high-quality health services	Percentage of children born in public hospitals that follow standard protocols on maternal and neonatal care B: 6% (2014)	Ministry of Public Health and Social Assistance administrative records	**3.1:** By 2022, the country will have the capacity to implement a model for maternal and neonatal health services that is consistent with quality care standards.	Ministry of Public Health and Social Assistance National Health Service	1 000	2 000	3 000

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR); other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	T: 50% Neonatal mortality rate B: 25 per 1000 live births (2014) Target: 18 per 1000		including prevention of obstetric violence				
4. By 2022, children will have access to high-quality, relevant, inclusive integrated care services for early childhood and education services	Percentage of children aged 36 to 59 months that attend early childhood programmes B: 39.8% (2014) T: (2022)	Ministry of Education administrative records	**4.1:** By 2022, national institutions will have the capacity to improve access to, relevance and quality of integrated services for early childhood, especially for children with disabilities **4.2:** By 2022, the Ministry of Education and schools in selected areas will have the capacity to improve the learning, completion and inclusion of children with disabilities	Ministry of Education National Institute for Early Childhood, National Institute for Student Welfare universities, National Council on Disability, NGOs	800	2 450	3 250
	Percentage of children who achieve a minimum level of competency in literacy and mathematics in primary education B: (2013) Third year Literacy: 9.41% Mathematics: 6.08% Sixth year Literacy: 20.62% Mathematics: 12.35% T Third year Literacy: 15% Mathematics: 10% Sixth year Literacy: 25% Mathematics: 15%	Ministry of Education national evaluation					
	Proportion of children with disabilities who attend regular school compared to special school B: 5.8% T: 10%	Ministry of Education administrative records					
Programme effectiveness: programme coordination and cross-cutting issues are ensured such as performance monitoring and mainstreaming gender focus					200	150	350

UNICEF outcomes	Key progress indicator baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)	
					RR	OR	Total
Total resources					**4 625**	**10 850**	**15 475**